FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSIO

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY						
Prefix		Serial				
	Date Received					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)									
Ollie Koala's BackYard I, LLC									
Filing Under (Check box(es) that apply): Rule 504 Rule 505 R	ule 506								
Type of Filing: ☐ New Filing ☒ Amendment									
A. BASIC IDENTIFICATION DAY	ΓΑ								
1. Enter the information requested about the issuer									
Name of the Issuer (check if this is an amendment and name has change	d, and indicate change.)								
Ollie Koala's BackYard I, LLC									
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)								
P. O. Box 308, Ponte Vedra, Florida 32004	(904) 285-9617								
Address of Principal Business Operations (Number and Street, City, State, Zip Coo	le) Telephone Number (Including Area Code)								
(if different from Executive Offices)	PROCESSED								
Brief Description of Business	FRUULUULU								
Family entertainment center	A P 2009								
	FEB 1 5 2005 F								
·									
Type of Business Organization	THOMSON								
☐ corporation ☐ limited partnership, already formed	FINANCIAL								
⊠ ot	her (please specify): limited liability company								
☐ business trust ☐ limited partnership, to be formed									
Month	Year								
Actual or Estimated Date of Incorporation or Organization: 09	04 🛮 Actual 🗀 Estimated								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service	abbreviation for State: <u>FL</u>								
CN for Canada; FN for other foreig	n jurisdiction)								

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

A DACIC IDENTIFICATION DATA	
A. BASIC IDENTIFICATION DATA	·
2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% of equity securities of the issuer; 	or more of a class of
 Each executive officer and director of corporate issuers and of corporate general and managing part issuers; and Each general and managing partner of partnership issuers. 	ners of partnership
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	* General and/or Managing Partner * manager of issuer
Full Name (Last name first, if individual)	
Bruce T. Schilling	
Business or Residence Address (Number and Street, City, State, Zip Code)	
P. O. Box 398, Ponte Vedra Beach, 32004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	*⊠ General and/or Managing Partner * manager of issuer
Full Name (Last name first, if individual) Kevin W. Price	· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number and Street, City, State, Zip Code) P. O. Box 398, Ponte Vedra Beach, 32004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Business or Residence Address

				B. INI	FORMATI	ON ABO	UT OFFE	RING				
												Yes No
1. Has the	e issuer so	ld, or does	the issuer	intend to	sell, to no	n-accredit	ed investo	rs in this c	ffering?		•••••	
			Ansv	wer also ii	n Appendix	k, Column	2, if filing	under UL	OE.			
2. What is	s the mini	num inve	stment tha	ıt will be a	ccepted fr	om any inc	dividual?				\$	32,500
												Yes No
3. Does th	ne offering	permit jo	int owners	hip of a si	ngle unit?						•••••	
similar is an a broker	remunera ssociated p or dealer.	ation for s person or a If more t	ested for e olicitation agent of a k han five (5 oker or dea	of purchas proker or o persons	sers in con dealer regi	nection wi stered wit	th sales of h the SEC	securities and/or wit	in the offe th a state o	ering. If a or states, li	person to b	e listed ne of the
Full Name	e (Last nai	ne first, if	individual	l)								
		•							•			
Business	or Residen	ce Addres	s (Number	and Stree	et, City, St	ate, Zip Co	ode)					
Name of A	ssociated	Broker or	Dealer								····	
			Solicited or		Solicit Puro	chasers			<u> </u>			
			ividual State									
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
1 un rume	(Dast name	mist, ii iiid	iiviuuai)									
Rusiness or	· Rasidanca	Address (N	lumber and	Stroot City	. Stata 7in	Code)						
Dusiness of	nesidence	Address (I	diffuer and	Sireet, Oit	y, State, Zip	Code						
Name of As	accipted Dr	okon on Do	2104									
Name of As	sociated bi	oker or Dea	aler									
Carana in IV	Lish Dans	7:	C-li-ia-d	. T-4 1- 4-	Callair Dan	1						
			Solicited or ividual State								🗆 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA]] NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	lividual)									
Business or	Residence	Address (N	lumber and	Street, City	y, State, Zip	Code)						
Name of As	ssociated Br	oker or De	aler								-	
			Solicited or ividual State			chasers					🗆 All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]] NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	(Aggregate Offering Price	A	mount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (Specify: limited liability company interests)	\$	1,430,000	\$	611,000
	Total	\$	1,430,000	\$	611,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		11	\$	611,000
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)	,	0	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security	-	Dollar Amount Sold
	Rule 505		0	\$	0
	Regulation A		0	\$	0
	Rule 504		0	\$	0
	Total		0	\$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	250.00
	Legal Fees		_	\$	5,000.00
	Accounting Fees.			\$	·
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)		_	\$	
	Other Expenses (identify)			\$	
	Total			\$	

C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AF	ND USE OF PRO	JCEEDS
Part C - Question 1 and total expenses:	aggregate offering price given in response to furnished in response to Part C – Question 4.a. occeeds to the issuer."		\$ 1,424,750.00
not known, furnish an estimate and ch	poses shown. If the amount for any purpose in each the box to the left of the estimate. The the adjusted gross proceeds to the issuer set		
		Payment to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		⊠ \$ 40,000.00	□ \$
Purchase of real estate		□ \$	□ \$
Purchase, rental or leasing and in	nstallation of machinery and equipment	□ \$	□ \$
	ouildings and facilities	□ \$	□ \$
Acquisition of other businesses (in offering that may be used in exchange and to a marger)	ncluding the value of securities involved in this lange for the assets or securities of another	□ \$	□ \$
		□ \$	□ \$
		□ \$	□ ³ ⊠ \$1,384,750.00
5 1		□ \$ □ \$	□ \$
		. Ψ	□ Ф
		□ \$	□ \$
		□ \$ ⊠ \$ 40,000.00	□ \$ ⊠ \$1384,750.00
	otals added)		24,750.00
	D. FEDERAL SIGNATURE		
505, the following signature constitutes an	be signed by the undersigned duly authorized p n undertaking by the issuer to furnish to the U.S ormation furnished by the issuer to any non-accor-	S. Securities and Exc	change Commission,
Issuer (Print or Type)	Signature 2000	ate	
Ollie Koala's BackYard I, LLC Name of Signer (Print or Type)	Title of Signer (Print or Type)	1/20/05	
Bruce T. Schilling	President		
, <u></u>	ATTENTION		
	ATTENTION —		
Intentional misstatements or o	omissions of fact constitute federal criminal viol	iations. See 18 U.S	C: 1001)

E. STATE SIGNATURE									
	62 presently subject to any of the disqualification	Yes	No ⊠						
See Apper	ndix, Column 5, for state response.								
2. The undersigned issuer hereby undertanotice on Form D (17 CFR 239.500) at s	akes to furnish to any state administrator of any state in which this no such times as required by state law.	otice is file	ed, a						
3. The undersigned issuer hereby undertable by the issuer to offerees.	akes to furnish to the state administrators, upon written request, info	rmation fo	urnished						
Uniform limited Offering Exemption (U	t the issuer is familiar with the conditions that must be satisfied to be ILOE) of the state in which this notice is filed and understands that the burden of establishing that these conditions have been satisfied.								
The issuer has read this notification and k by the undersigned duly authorized person	knows the contents to be true and has duly caused this notice to be sign.	ned on its	behalf						
Issuer (Print or Type)	Signature Date								
Ollie Koala's BackYard I, LLC	(1) rece 1 . 2 lell 1/20/05								
Name (Print or Type)	Title (Print or Type)								
Bruce T. Schilling	President								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2 .	3		4						
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL		X					· · · · · · · · · · · · · · · · · · ·				
AK		X									
AZ		X									
AR		X					·				
CA		X									
СО		X	LLC Interest			0	n/a		X		
CT		X									
DE		X									
DC		X									
FL		X	LLC Interest	10	546,000	0	n/a		X		
GA		X									
HI		X									
ID		X									
IL		X									
IN		X									
IA		X	LLC Interest	1	65,000	0	n/a		X		
KS		X									
KY		X									
LA		X									
ME		X									
MD		X									
MA		X									
MI		X									
MN		X									
MS		X									

APPENDIX

1	Intend	2 .	Type of security and aggregate		4							
	investor	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)							
State	Yes	No No	(Turt o rum 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	(Part E-It	No			
МО	105	X		Investors	Timount	Investors		Tes	110			
MT		X	LLC Interest			0	n/a		X			
NE		X	LEO Interest						1			
NV		X										
NH		X										
NJ		X										
NM		X										
NY		X										
NC		X										
ND		Х										
ОН		X										
ОК		X										
OR		X										
PA		X										
RI		X										
sc		X				,						
SD		X										
TN		X										
TX		X										
UT		X		_								
VT		X										
VA		X										
WA		X						<u> </u>				
WV		x										
WI		X	LLC Interest			0	n/a		X			

APPENDIX

1		2 .	3			4		5	
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		X							
PR		X							